## PART B - FEE(S) TRANSMITTAL

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appropriate. All further	correspondence includired below or directed oth	ng the Patent, advance o	rders and notification of n	naintenance fees v	vill be 1	mailed to the current	ould be completed where correspondence address as rate "FEE ADDRESS" for	
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							(Depositor's name)	
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/587,947	10/19/2006		Heide-Anna Gotz	iotz		4662-221	5683	
			ER AND PREPARATION					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300 T	\$0		\$1810	03/29/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
TISCHLER, FRANCES  1. Change of correspondence address or indication of the correspondence address or indication o		1796	528-300000  2. For printing on the p					
☐ Change of correspondence address (or Change of Correspondence Address Form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single registered attorney or a 2 registered patent atto	agents OR, alternatively,  ) the name of a single firm (having as a member a gistered attorney or agent) and the names of up to registered patent attorneys or agents. If no name is sted, no name will be printed.				
	less an assignee is ident h in 37 CFR 3.11. Comp GNEE		THE PATENT (print or type data will appear on the part of the part	ntent. If an assign assignment. and STATE OR C	COUNT		cument has been filed for	
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🖾 Co	orporati	on or other private gro	up entity 🗖 Government	
4a. The following fee(s) are submitted:  Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies3			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached. (Pd. electronically)  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1140 (enclose an extra copy of this form).					
5. Change in Entity Sta  a. Applicant claim	<b>tus</b> (from status indicated s SMALL ENTITY state		b. Applicant is no long	ger claiming SMA	LL ENT	TTY status. See 37 CF	R 1.27(g)(2).	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepte tes Patent and Trademark	d from anyone other than t Office.	he applicant; a regi	stered a	ttorney or agent; or the	e assignee or other party in	
Authorized Signature	/Bryan H	. Davidson/		Date		March 10, 20	10	
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an application. Confiden submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	tiality is governed by 35 dapplication form to the tons for reducing this buringinia 22313-1450. DC 13-1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the NOT SEND FEES OR	on is required to obtain or r 1.14. This collection is est depending upon the indive e Chief Information Office COMPLETED FORMS TO spond to a collection of inf	imated to take 12 idual case. Any co rr, U.S. Patent and D THIS ADDRESS	minutes omment Traden S. SENI	to complete, including s on the amount of tin ark Office, U.S. Depa O TO: Commissioner f	g gathering, preparing, and he you require to complete rtment of Commerce, P.O. or Patents, P.O. Box 1450,	